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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/696,733	10/29/2003	Christopher Hafey	STEN.P0007	6305
23349	7590	03/25/2005	EXAMINER	
STATTLER JOHANSEN & ADELI P O BOX 51860 PALO ALTO, CA 94303			CHUNG, DANIEL J	
			ART UNIT	PAPER NUMBER

2672

DATE MAILED: 03/25/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary

Application No.

10/696,733

Applicant(s)

HAFEY ET AL.

Examiner

Daniel J Chung

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-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --
Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☐ Responsive to communication(s) filed on ____.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-30 is/are pending in the application.
- 4a) Of the above claim(s) ____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) ____ is/are allowed.
- 6) ☒ Claim(s) 1, 2, 4-12, 14-22 and 24-30 is/are rejected.
- 7) ☒ Claim(s) 3, 13 and 23 is/are objected to.
- 8) ☐ Claim(s) ____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on ____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
- ☐ Certified copies of the priority documents have been received.
 - ☐ Certified copies of the priority documents have been received in Application No. ____.
 - ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☒ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
Paper No(s)/Mail Date 3-26-04.
- 4) ☐ Interview Summary (PTO-413)
Paper No(s)/Mail Date. ____.
- 5) ☐ Notice of Informal Patent Application (PTO-152)
- 6) ☐ Other: ____.

DETAILED ACTION

Information Disclosure Statement

Receipt is acknowledged of Applicant's Information Disclosure Statement of 3-26-2004, which has been placed in the application file and considered by the Examiner.

Drawings

The drawings are not objected to by the Examiner.

Specification

Please review the application and correct all informalities.

Claim Rejections - 35 USC § 102

The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

Claims 1-2,4-12,14-22 and 24-30 are rejected under 35 U.S.C. 102(b) as being anticipated by Hilton et al. (5,452,416)

Regarding claim 1, Hilton et al discloses that the claimed feature of a method for controlling display of medical images, method comprising the step of: displaying a plurality of thumbnail size medical images [i.e. "Axial T1", "Axial T2", ... "Sagittal T1",

shown in Fig 4, Fig 14, Fig 16] on a control panel [i.e. “control panel” shown in Fig 4, Fig 14, Fig 16]; displaying, on control panel, a first navigation rectangle [i.e. “Axial T1”, which located in presentation area 1] that encompasses a first set of thumbnail size medical images [i.e. “Axial T1-1” to “Axial T1-n”; 55a-55b in Fig 6] comprising at least one of thumbnail size medical images displayed on control monitor [i.e. “display container”, shown in Fig 4, Fig 14, Fig 16]; displaying, on a first display [i.e. “output monitor”; 26 in Fig 9], at least one medical image that corresponds to first set of thumbnail size medical images [“Axial T1-1” to “Axial T1-n”]; displaying, on control panel, a second navigation rectangle [i.e. “Axial T2”, which located in presentation area 2] that encompasses a second set of thumbnail size medical images [i.e. “Axial T2-1” to “Axial T2-n”; 55c-55d in Fig 6] comprising at least one of thumbnail size medical images displayed on control monitor [i.e. “display container”, shown in Fig 4, Fig 14, Fig 16]; and displaying, on a second display [i.e. “output monitor”; 27 in Fig 9], at least one medical image that corresponds to second set of thumbnail size medical images [“Axial T2-1” to “Axial T2-n”]. (See Abstract, Fig 4, Fig 6, Fig 9, Fig 11, Fig 14, Fig 16)

Regarding claim 2, Hilton et al discloses that the steps of: displaying images for at least one medical exam [i.e. “Axial T1”, shown in Fig 4, Fig 14, Fig 16] on control panel, images for medical exam comprising a plurality of thumbnail size medical images; receiving user input to select at least one thumbnail size medical image [“Axial T1”] of a medical exam for a navigation rectangle [i.e. “presentation area 1”]; displaying, on control panel, in response to user input, a navigation rectangle that encompasses

thumbnail size medical image for medical exam selected; and displaying, on a display [26], at least one medical image ["Axial T1-1" to "Axial T1-n"] that corresponds to thumbnail size medical image. (See Fig 4, Fig 9, Fig 14, Fig 16)

Regarding claim 4, Hilton et al discloses that receiving user input to select at least one additional thumbnail size medical image [i.e. "Axial T2-1" to "Axial T2-n"]; displaying, on control panel, in response to user input, a new navigation rectangle that encompasses additional thumbnail size medical image selected; and displaying, on a display [28], at least one medical image that corresponds to additional thumbnail size medical image [i.e. "Axial T2-1" to "Axial T2-n"]. (See Fig 4, Fig 9, Fig 10)

Regarding claim 5, Hilton et al discloses that the step of displaying, on a first display, at least one medical image that corresponds to first set of thumbnail size medical images comprises the step of displaying a plurality of medical images, each in a window pane on first display. (See Fig 4, Fig 14, Fig 16)

Regarding claim 6, Hilton et al discloses that displaying, in a portion of a thumbnail image on control panel, a pane icon that identified a location of a pane for corresponding medical image displayed on display. (See Fig 4, Fig 14, Fig 16)

Regarding claim 7, Hilton et al discloses that receiving user input to reposition at least one thumbnail size medical image [i.e. "Axial T2-1" to "Axial T2-n"] within

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navigation rectangle; displaying, on control panel, in response to user input, navigation rectangle that encompasses repositioned thumbnail size medical image; and displaying, on a display [28], medical images in an order that corresponds to repositioned thumbnail size medical images. (See Fig 14a-d, Fig 15, Fig 16)

Regarding claim 8, Hilton et al discloses that generating a plurality of virtual monitors [26,27,28] for a single display (See Fig 9); displaying, on control panel, a first navigation rectangle [i.e. "presentation area 1"] that encompasses a first set of thumbnail size medical images [i.e. "Axial T1-1" to "Axial T1-n"] comprising at least one of thumbnail size medical images ["Axial T1"] displayed on control monitor (See Fig 4, Fig 14, Fig 16); displaying, within a first virtual monitor on display [26], at least one medical image that corresponds to first set of thumbnail size medical images [i.e. "Axial T1-1" to "Axial T1-n"] (See Fig 9); displaying, on control panel, a second navigation rectangle [i.e. "presentation area 2"] that encompasses a second set of thumbnail size medical images [i.e. "Axial T2-1" to "Axial T2-n"] comprising at least one of thumbnail size medical images ["Axial T2"] displayed on control monitor (See Fig 4, Fig 14, Fig 16); and displaying, within a second virtual monitor on display [27], at least one medical image that corresponds to second set of thumbnail size medical images [i.e. "Axial T2-1" to "Axial T2-n"]. (See Fig 9)

Regarding claim 9, Hilton et al disclose that receiving user input to bind at least two navigation rectangles; receiving user input ["control panel"] to conduct an operation

on two navigation rectangles; conducting, in response to input, operation on both of navigation rectangles [i.e. "presentation area"] displayed on control panel; and conducting operation so as to effectuate two monitors that correspond to two navigation rectangles bound. (See Fig 4, Fig 9, Fig 11, Fig 14, Fig 16)

Regarding claim 10, Hilton et al discloses that displaying a plurality of window panes on a display, such that window panes [i.e. "presentation area"; 1-4 in Fig 4, Fig 14, Fig 16] divide display into a plurality of sections (See Fig 4, Fig 14, Fig 16); displaying a plurality of medical images [i.e. "Axial T1", "Axial T2", ... "Sagittal T1", shown in Fig 4, Fig 14, Fig 16], each in a window pane of display; receiving user input to generate a segment [i.e. 'upper portion of presentation area'] for at least two window panes; receiving user input to conduct an operation on segment; conducting, in response to input, operation on segment displayed on control panel; and conducting operation so as to effectuate two window panes that correspond to segment. (See Fig 4, Fig 9, Fig 11, Fig 14, Fig 16)

Regarding claim 11, claim 11 is similar in scope to the claim 1, and thus the rejection to claim 1 hereinabove is also applicable to claim 11.

Regarding claim 12, claim 12 is similar in scope to the claim 2, and thus the rejection to claim 2 hereinabove is also applicable to claim 12.

Regarding claim 14, claim 14 is similar in scope to the claim 4, and thus the rejection to claim 4 hereinabove is also applicable to claim 14.

Regarding claim 15, claim 15 is similar in scope to the claim 5, and thus the rejection to claim 5 hereinabove is also applicable to claim 15.

Regarding claim 16, claim 16 is similar in scope to the claim 6, and thus the rejection to claim 6 hereinabove is also applicable to claim 16.

Regarding claim 17, claim 17 is similar in scope to the claim 7, and thus the rejection to claim 7 hereinabove is also applicable to claim 17.

Regarding claim 18, claim 18 is similar in scope to the claim 8, and thus the rejection to claim 8 hereinabove is also applicable to claim 18.

Regarding claim 19, claim 19 is similar in scope to the claim 9, and thus the rejection to claim 9 hereinabove is also applicable to claim 19.

Regarding claim 20, claim 20 is similar in scope to the claim 10, and thus the rejection to claim 10 hereinabove is also applicable to claim 20.

Regarding claim 21, claim 21 is similar in scope to the claim 1, and thus the rejection to claim 1 hereinabove is also applicable to claim 21.

Regarding claim 22, claim 22 is similar in scope to the claim 2, and thus the rejection to claim 2 hereinabove is also applicable to claim 22.

Regarding claim 24, claim 24 is similar in scope to the claim 4, and thus the rejection to claim 4 hereinabove is also applicable to claim 24.

Regarding claim 25, claim 25 is similar in scope to the claim 5, and thus the rejection to claim 5 hereinabove is also applicable to claim 25.

Regarding claim 26, claim 26 is similar in scope to the claim 6, and thus the rejection to claim 6 hereinabove is also applicable to claim 26.

Regarding claim 27, claim 27 is similar in scope to the claim 7, and thus the rejection to claim 7 hereinabove is also applicable to claim 27.

Regarding claim 28, claim 28 is similar in scope to the claim 8, and thus the rejection to claim 8 hereinabove is also applicable to claim 28.

Regarding claim 29, claim 29 is similar in scope to the claim 9, and thus the rejection to claim 9 hereinabove is also applicable to claim 29.

Regarding claim 30, claim 30 is similar in scope to the claim 10, and thus the rejection to claim 10 hereinabove is also applicable to claim 30.

Allowable Subject Matter

Claims 3,13 and 23 are objected to as being dependent upon a rejected base claim, but would be allowable if rewritten in independent form including all of the limitations of the base claim and any intervening claims.

The following is an examiner's statement of reasons for allowable subject matter:

The present invention is directed to method of controlling medical images in a multi-display system. The above identified claims includes the uniquely distinct features "receiving user input to replace at least one thumbnail size medical image of a medical exam with at least one different thumbnail size medical image of medical exam; displaying, on control panel, in response to user input, a new navigation rectangle that encompasses different thumbnail size medical image selected; and displaying, on a display, at least one medical image that corresponds to different thumbnail size medical image." The closest prior art, Hilton et al. (5,452,416) discloses a similar system, either singularly or in combination, fail to anticipate or render the above underlined limitations obvious.

Any comments considered necessary by applicant must be submitted no later than the payment of the issue fee and, to avoid processing delays, should preferably accompany the issue fee. Such submissions should be clearly labeled "Comments on Statement of Reasons for Allowance."

Conclusion

The prior art made of record and not relied upon is considered pertinent to applicant's disclosure. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Daniel J. Chung whose telephone number is (703) 306-3419. He can normally be reached Monday-Thursday and alternate Fridays from 7:30am- 5:00pm. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Michael, Razavi, can be reached at (703) 305-4713.

Any response to this action should be mailed to:

Commissioner of Patents and Trademarks
Washington, D.C. 20231

or faxed to:

(703) 872-9306 (Central fax)
(703) 872-9314 (for Technology Center 2600 only)


Hand-delivered responses should be brought to Crystal Park II, 2121 Crystal Drive, Arlington, VA, Sixth Floor (Receptionist).

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Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the Technology Center 2600 Customer Service Office whose telephone number is (703) 306-0377.

djc
March 8, 2005



MICHAEL RAZAVI
SUPERVISORY PATENT EXAMINER
TECHNOLOGY CENTER 2600